

**Greater Tompkins County Municipal Health Insurance Consortium
Medical Auditing Services RFP Questions
February 13, 2014**

Question/Clarification	Response
Regarding the systems reviews, is the use of a current, and factually accurate SSAE 16 SOC report sufficient evidence of proper systems controls and processing?	It would be our opinion that the use of the SSAE 16 SOC Report would be sufficient for overall system controls. However, we would like the auditors to review claims on the “system” to ensure benefits are being adjudicated properly. This type of review would also lead to some audit and review of system capabilities and accuracies which we would like the auditors to report on.

TOMPKINS COUNTY INSURANCE AND INDEMNIFICATION

The Successful Bidder Shall Maintain and Agree to the Following:

(Professional), hereinafter referred to as Contractor, shall indemnify, hold harmless and defend Tompkins County, and its officers, employees, agents, and elected officials for injury or death to any person or persons or damage to property arising out of the performance of the Contractor, its employees, subcontractors or agents with the exception of all actions and claims arising out of the negligence of Tompkins County. The Contractor shall maintain the following minimum limits of insurance or as required by law, whichever is greater.

- A.) **Workers' Compensation and New York Disability** - Statutory Coverage Employer's Liability - Unlimited.
- B.) **Commercial General Liability** including, contractual, independent contractors, products/completed operations - Occurrence Form required.

*	Each Occurrence	\$1,000,000
*	General Aggregate	2,000,000
*	Products/Completed Operations Aggregate	2,000,000
*	Personal and Advertising Injury	1,000,000
*	Fire Damage Legal	50,000
*	Medical Expense	5,000

- **General Aggregate** shall apply separately to the project prescribed in the contract

* Tompkins County and its officers, employees, agents and elected officials are to be included as **Additional Insureds**

- C.) **Professional Liability** - \$1,000,000 **OR Errors and Omissions Liability** - \$1,000,000

All insurance shall be written with insurance carriers licensed by the State of New York Insurance Department and have a Best's rating of A XI or better. Proof of insurance shall be provided on the Tompkins County Certificate of Insurance (copy attached) including the Contract Number. The accord Certificate of Insurance or insurance company certificate may be used for proof of Workers' Compensation and Disability. All Certificates shall contain a sixty (60) day notice of cancellation, non-renewal or material change to Tompkins County. All Certificates must be signed by a licensed agent or authorized representative of the insurance company. Broker signature is not acceptable. Certificates of Insurance shall be submitted with the proposal.